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April 6, 1999 LB 480

General File, senator priority bills, LB 480. Mr. Clerk.

CLERK: Mr. President, LB 480 was a bill originally introduced by Senator Schimek. (Title read.) The bill was introduced on January 14, referred to the Health Committee. The bill was advanced to General File.

SENATOR COORDSEN: Thank you. Senator Schimek, to open on LB 480.

SENATOR SCHIMEK: Thank you, Mr. President and members of the body. LB 480 creates the Women's Health Initiative of Nebraska. This bill brings focus, direction, cooperation, and leadership to the area of women's health issues. Consider the fact that women tend to live longer than men, but suffer poor health outcomes and greater disability from disease. Women who live in poverty and have less than a high school education have shorter life spans and higher rates of illness. Because of women's higher rates of chronic disease and longer life spans, they constitute a higher proportion of persons requiring long-term care. In 1996, 71.8 percent of the 17,152 persons in nursing home beds in Nebraska were female. Women have unique medical needs and are faced with a number of medical problems that either do not affect men at all, or that affect them far less Examples of the latter are osteoporosis and frequently. depression. Women have problems that manifest differently or respond differently to treatment as compared to men, such as coronary heart disease and HIV-AIDS. Since past research has focused primarily on men, there is much that is just now being learned about women, such as different "symptomology" for heart attacks. And really, I think I could say that it's only been in the last probably five to ten years that this kind of focus has changed. And part of the reason for that is because that more women were getting elected to Congress, they insisted on more research and more attention to women's diseases. National Institute of Health has had that focus over the last Let me give you some statistics. five to ten years. disease is the leading cause of death among Nebraska women, accounting for one-third of all deaths among women in 1996. Heart disease death rates for African-American women and Native American women were double the rate for white women in the state from 1991 to 1995. Diabetes-related death